

1 September 2025

The Hon. Clayton Barr, MP
Committee Chair, Committee on Community Services,
GPO Box 5341
SYDNEY NSW 2001

Dear Mr Barr and Committee Members,

Question taken on notice - Health Services Amendment (Splitting of the Hunter New England Health District) Bill 2025

Thank you for inviting Cancer Council NSW to appear at the recent Health Services Amendment (Splitting of the Hunter New England Health District) Bill 2025 Inquiry hearing. During our appearance, we took the following question on notice:

You note in your submission that regional New South Wales has poorer preventative health care. In that context, what do you see as simple improvements that could be made to improve that preventative health care, particularly in the more remote areas of the health district? And what are some best practices from other health districts or other parts of Australia that we could be adopting?

Improvements in preventative health in Hunter New England LHD

As noted in our answer, in parts of the Hunter New England LHD there are higher rates of smoking,¹ risky alcohol consumption,² and low cancer screening participation rates compared to the rest of NSW.³ These are all linked to higher rates of cancer, and tackling smoking, alcohol consumption and increasing screening rates are critical to reducing overall cancer rates in the Hunter New England LHD. Working with the community to raise awareness of the risks associated with these factors in a manner that is culturally safe and will be adopted by the community is key to effectively working to implement preventative health measures in these communities. This work is best led by the LHD, in partnership with the community and local not for profit providers in the area to ensure maximum community uptake.

Training local GPs and Nurse Practitioners with accessible education will enable ongoing community support after outreach efforts. Working closely with any local Aboriginal Medical Services in the community is also key to these measures being adopted. Ensuring there are adequate levels of staffing in all communities across the LHD will enable for this education to be delivered effectively. GPs are essential to providing good healthcare to regional and remote communities and would be best placed to provide prevention education to the community.

Best practice examples in preventative health in Australia

Each state and territory government in Australia is responsible for delivery of preventative health care, in line with the National Preventive Health Strategy 2021-2030.⁴ The recent Productivity Commission's Interim report on 'Delivering quality care more efficiently' recommended a national framework to support government investment in prevention, improving outcomes and slowing the escalating growth in government expenditure.⁵ Cancer Council NSW would encourage NSW Health and the LHDs across the state to engage in conversations with the federal government on how we could better provide prevention initiatives to all across NSW.

Best practice for preventive health in NSW:

- Increase in funding for prevention

Health promotion is under invested in across NSW. We have previously advocated for the NSW Government to spend at least 5% of the total health budget on primary prevention of chronic disease.⁶ There are efficiencies to gain from having centralised prevention funding that can then be implemented in each LHD. Funding for prevention in NSW should align with the national strategic priorities on prevention to ensure the best outcomes, including full implementation and evaluation of programs and services. Centralised prevention funding, directed by a state-wide strategic plan and implemented at the LHD level, would support prevention healthcare in NSW based on identified community needs.

- Prioritisation and better coordination of preventive health goals

Success in preventive health requires all levels of government to prioritise, work together and be invested in its overall success, as per the recent Interim Productivity Commission Report.⁵ It is positive that each LHD has prevention priorities included in their core strategic priorities that align to the overall state strategic priorities. These prevention priorities should also be highlighted separately in order to have a real impact and show the LHDs long-term commitment to improving preventive health for their communities. WA, QLD, SA and VIC have state prevention agencies, that all work in collaboration to share key learnings.⁷ WA, VIC and SA are also investing in statewide education campaigns around topics such as healthy weight, alcohol consumption and smoking rates, encouraging people to use support services such as Quitline and the Get Healthy Information and Coaching Service which are key to preventive health. There is scope for NSW to invest more in statewide public education mass media campaigns to help drive healthy behaviours for all in NSW.

The recent Special Commission of Inquiry into Healthcare Funding also delivered recommendations into prevention, including that any new initiatives and policy proposals be looked at through a preventative health lens, and that prevention in NSW should be informed and coordinated by a multiagency, multidisciplinary body led by NSW Health.⁸ These recommendations should be adopted in full by the NSW Government.

- Better local implementation

LHDs need to be supported to develop, implement and evaluate work in preventive health, as they are best placed to work with the communities they service. This should be done with community consultation where possible to ensure services are culturally appropriate and relevant to the people accessing them. Partnering with community organisations and local not for profit providers to deliver these programs are also key to long-term success.

The Hunter New England LHD's Strategic Plan is set to be redeveloped for 2027 and this would be a good time for this LHD to engage with community, and other stakeholders, such as Cancer Council NSW, about what the prevention needs are for the community. We would be happy to provide input in how priorities could better include cancer prevention activities.

Whilst this is a good time for Hunter New England LHD to better look at prevention priorities, all LHDs across the state should ensure there is:

- Consultation with people in the community including not for profits who deliver services, such as Cancer Council NSW
- Co-design of priorities where possible
- All priorities are informed by data and evidence
- Are well resourced.

Working to ensure that all in the community benefit from these services is essential to good preventive health care.

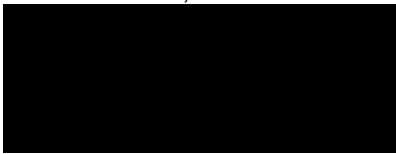
- Cancer prevention specifically must be included

All preventive health strategies should include actions that reduce people's cancer risk such as tobacco reduction, improved cancer screening participation, education about sun protection, reducing alcohol intake, and actions for reducing obesity. Cancer Institute NSW provide resources and information on cancer prevention, including through their Cancer Plan,⁹ that we support. LHDs need to be able to incorporate this in their strategic plans to ensure we are all working together to reduce cancer risk for everyone across the state.

If you have any questions or require any further information, your staff can contact [REDACTED] at [REDACTED] or on [REDACTED]. Please do not hesitate to contact us with any queries.

Thank you again for the opportunity to appear at the recent Inquiry Hearing and provide further information on our evidence.

All the best,



Brad Gellert
Manager, Policy & Advocacy
Cancer Council NSW

References

- ¹ <https://www.healthstats.nsw.gov.au/indicator?name=-beh-smo-cat-curr-phs&location=LHD&view=Trend&measure=prevalence&confidence=true&groups=&compare=LHD&filter=LHD,All%20LHDs,Hunter%20New%20England%20LHD>
- ² <https://www.healthstats.nsw.gov.au/indicator?name=-beh-alc-freq-phs&location=LHD&view=Trend&measure=prevalence&confidence=true&groups=Drinking%20frequency&compare=Drinking%20frequency,LHD&filter=Drinking%20frequency,Never,Less%20than%20weekly,Weekly,Daily&filter=LHD,All%20LHDs,Hunter%20New%20England%20LHD>
- ³ <https://www.healthstats.nsw.gov.au/indicator?name=-beh-alc-freq-phs&location=LHD&view=Trend&measure=prevalence&confidence=true&groups=Drinking%20frequency&compare=Drinking%20frequency,LHD&filter=Drinking%20frequency,Never,Less%20than%20weekly,Weekly,Daily&filter=LHD,All%20LHDs,Hunter%20New%20England%20LHD>
- ⁴ https://www.health.gov.au/sites/default/files/documents/2021/12/national-preventive-health-strategy-2021-2030_1.pdf
- ⁵ <https://www.pc.gov.au/inquiries/current/quality-care/interim/quality-care-interim.pdf>
- ⁶ <https://healthcarefunding.specialcommission.nsw.gov.au/assets/Uploads/publications/Listing-of-Submissions-48/Submission-059-Cancer-Council-NSW.pdf>
- ⁷ <https://www.preventivehealth.sa.gov.au/about/news-announcements/state-prevention-agencies-unite-to-tackle-chronic-disease-in-landmark-forum>
- ⁸ <https://www.health.nsw.gov.au/Reports/Publications/special-commission-inquiry-funding.pdf>
- ⁹ <https://www.cancer.nsw.gov.au/getmedia/9b902aa8-329d-42f9-94db-8ecede00fd1e/CINSW-NSW-Cancer-Plan-Dec2023-web.pdf>